

Overview of models for technology transfer (private-sector-driven vs. developing country or donor-driven)

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Goal-Increase skills and capacity of developing country vaccine manufacturers

- **Drivers**
 - **Reduce costs**
 - **Increase profits**
 - **Increase global capacity**
 - **Increase affordability/availability for resource-poor countries**
 - **Increase self-reliance (developing countries)**
 - **Improve ability to mount global response to future infectious disease threats**

Important considerations regarding technology transfer for biological products

- **Almost all biological products are defined, in large part, by the manufacturing process**
- **Manufacturing process nearly impossible to exactly duplicate from one facility to another**
- **Technology transfer is more time consuming and difficult than most organizations anticipate (transferer and transferee)**
- **Clinical bridging studies almost always required-size and rigor dependent upon NRA of transferee (and NRAs of external markets)**

Prior and current models of technology transfer

- **Multinational pharmaceutical company to developing country vaccine manufacturer**
 - **rHepB vaccine (Merck to China)**
 - **Seasonal inactivated flu vaccine (Sanofi Pasteur to Butantan, Brazil)**
- **Meningococcal GpA conjugate vaccine (PATH/US FDA to Serum Institute of India)**
- **Inactivated flu vaccine (WHO/Netherlands Vaccine Institute (hub) to various developing country vaccine manufacturers)**

John W. Boslego, MD

jboslego@path.org

